

IT-540ES (2009) WEB	or calendar year 2	2009 or fiscal year ending	year	
Print Your Social Sec	curity Number	Print Spouse's Social Security Number	Payment due date	INDIVIDUAL Voucher 1
If name or address is incorrect, make necessary changes.		Amount of payment.	DO NOT SEND CASH.	
To ensure proper credit, please DO No Louisiana Department of Revenu PO BOX 91007	•	orm with your payment to:	\$	.00
Baton Rouge LA 70821-9007  SPEC CODE	Name Spouse's N Address City, State,		Mark box if address has changed.	
	Sity, State,		Mail date	1905
19059	66	5	For office use only	



IT-540ES (2009) WEB	or calendar year 2	2009 or fiscal year ending	year	
Print Your Social Sec	curity Number	Print Spouse's Social Security Number	Payment due dat	te INDIVIDUAL Voucher 2
If name or address is incorrect, make necessary changes.		Amount of payment.	DO NOT SEND CASH.	
To ensure proper credit, please DO NO Louisiana Department of Revenu PO BOX 91007	•	orm with your payment to:	\$	.00
Baton Rouge LA 70821-9007  SPEC CODE	Name Spouse's N Address City, State,		Mark box if address has changed.	
	City, State,	<b>2</b> 1F	Mail date	1905
19059	665	5	For office use only	<u> </u>



F IT-540ES (2009) WEB	or calendar year 2	2009 or fiscal year ending	vear	
Print Your Social Secu	urity Number	Print Spouse's Social Security Number	Payment due date	INDIVIDUAL Voucher 3
If name or address is incorrect, make	re necessary changes.		Amount of payment. D	OO NOT SEND CASH.
To ensure proper credit, please DO NO Louisiana Department of Revenue PO BOX 91007	•	rm with your payment to:	\$	.00
Baton Rouge LA 70821-9007  SPEC CODE	Name Spouse's Na Address		Mark box if address has changed.	
	City, State, 2	ZIP	Mail date	1905
10050	665		For office use only	_

19059 665



IT-540ES (2009) WEB	For calendar year 2	2009 or fiscal year ending	vear	
Print Your Social Sec	curity Number	Print Spouse's Social Security Number	Payment due date	INDIVIDUAL Voucher 4
If name or address is incorrect, ma	ake necessary changes.		Amount of payment.	OO NOT SEND CASH.
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Baton Rouge LA 70821-9007  SPEC CODE	Name Spouse's N Address	ame	Mark box if address has changed.	
	City, State,	ZIP	Mail date	1905
10050	6.6	_	For office use only	

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